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JUN 25 2018	
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CLERK US DISTRICT COURT DISTRICT OF NEVADA	
BY: <u>[Signature]</u>	DEPUTY

UNITED STATES DISTRICT COURT  
DISTRICT OF NEVADA

JOSEPH MITTONT,

PLAINTIFF,

VS.

STATE OF NEVADA et al. DEFENDANT.

CASE NO. 3:15-cv-00499-MMD-WGC

NOTICE OF APPEAL

Notice is hereby given that Joseph Mittont, In Pro se, Plaintiff, in the above named captioned case, hereby appeals to the United States Court Of Appeals for the Ninth Circuit from the final judgment in Case # 3:15-cv-00499-MMD-WGC "Notice of Appeal" on 6-15-18, which was received by Plaintiff on June 19, 2018.

Plaintiff respectfully request on this 19 day of June, 2018, that this Honorable Court enter this Notice of Appeal, by Rules of the Court.

[Signature]

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## BASED ON YOUR PRESENT KNOWLEDGE:

1. Does this appeal involve a question of first impression? ☒ Yes ☐ No
2. Will the determination of this appeal turn on the interpretation or application of a particular case or statute? ☒ Yes ☐ No  
If yes, provide:  
Case name/statute                       
Citation:                       
Docket number, if unreported:
3. Is there any case now pending or about to be filed in this court or any other court or administrative agency which:
- a) Arises from substantially the same case or controversy as this appeal?  
☐ Yes ☒ No
- b) Involves an issue that is substantially the same, similar or related to an issue in this appeal?  
☐ Yes ☒ No  
Case name:                       
Citation:                       
Court or agency:                       
Docket number, if unreported:
4. Will this appeal involve a conflict of law within the Ninth Circuit?  
☐ Yes ☒ No  
Among circuits? ☐ Yes ☒ No  
If yes, explain briefly:

## DOES THIS APPEAL INVOLVE ANY OF THE FOLLOWING:

- ☐ Possibility of settlement;
- ☐ Likelihood of a motion to expedite the appeal;
- ☐ Multiple parties on either side for whom joint briefing is possible;
- ☐ Likelihood of motions to intervene on appeal;
- ☐ Likelihood of motions to file amicus briefs;
- ☐ Likelihood of motions to stay appeal pending resolution of a related case. Identify case name, docket number and court or agency:

☒ Other procedural complexities:

Evidence destroyed, hardship, default, perjury  
Witness, Ratchford on DK Hearing

## COUNSEL FOR APPELLANT(S):

NAME: MyselfFIRM:                     ADDRESS:                     TELEPHONE: ( )                     

I CERTIFY THAT A COPY OF THIS CIVIL APPEALS DOCKETING STATEMENT WAS SUBMITTED TO THE CLERK OF THE DISTRICT COURT OR THE CLERK OF THE U.S. COURT OF APPEALS, AND THAT IT WAS SERVED ON EACH PARTY/COUNSEL SHOWN ON THE ATTACHED SERVICE LIST.

                                                                
SIGNATURE DATE 6-19-18

REMEMBER TO ATTACH COPIES OF ORDER/JUDGMENT APPEALED FROM  
AND SERVICE LIST WITH TELEPHONE NUMBERS

UNITED STATES COURT OF APPEALS  
FOR THE NINTH CIRCUIT  
CIVIL APPEALS DOCKETING STATEMENT

INTERNAL USE ONLY

PLEASE TYPE OR PRINT. ATTACH ADDITIONAL PAGES IF NECESSARY.

TITLE IN FULL		DISTRICT:		JUDGE: <i>Miranda M. Du</i>	
		DATE COMPLAINT FILED: <i>2015</i>		DISTRICT COURT DOCKET NUMBER: <i>3:15-cv-00499-MMD-WGC</i>	
		DATE NOTICE OF APPEAL FILED: <i>6-18-18</i>		IS THIS A CROSS APPEAL? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
		HAS THIS MATTER BEEN BEFORE THIS COURT PREVIOUSLY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YES, STATE WHEN:			
CASE NAME:		CITATION:			
DOCKET NUMBER:					
CHECK AS MANY AS APPLY					
JURISDICTION		DISTRICT COURT DISPOSITION			
1. FEDERAL	2. APPELLATE	1. STAGE OF PROCEEDING	2. TYPE OF JUDGMENT/ORDER APPEALED	3. RELIEF	
<input checked="" type="checkbox"/> FEDERAL QUESTION <input type="checkbox"/> DIVERSITY <input type="checkbox"/> OTHER SPECIFY	<input checked="" type="checkbox"/> FINAL DECISION OF DISTRICT COURT <input type="checkbox"/> INTERLOCUTORY DECISION APPEALABLE AS OF RIGHT <input type="checkbox"/> INTERLOCUTORY ORDER CERTIFIED BY DISTRICT JUDGE (SPECIFY) <input type="checkbox"/> OTHER (SPECIFY)	<input checked="" type="checkbox"/> PRE-TRIAL <input type="checkbox"/> DURING TRIAL <input type="checkbox"/> AFTER TRIAL	<input type="checkbox"/> DEFAULT JUDGMENT <input checked="" type="checkbox"/> JUDGMENT/COURT DECISION <input type="checkbox"/> DISMISSAL/JURISDICTION <input type="checkbox"/> JUDGMENT/JURY VERDICT <input type="checkbox"/> DISMISSAL/MERITS <input type="checkbox"/> SUMMARY JUDGMENT <input type="checkbox"/> JUDGMENT NOV <input type="checkbox"/> DECLARATORY JUDGMENT <input type="checkbox"/> DIRECTED VERDICT <input type="checkbox"/> OTHER (SPECIFY)	<input type="checkbox"/> DAMAGES: AMOUNT SOUGHT <i>\$2 million</i> AMOUNT <input type="checkbox"/> GRANTED <input checked="" type="checkbox"/> DENIED <i>\$0</i> <input type="checkbox"/> INJUNCTIONS <input type="checkbox"/> PRELIMINARY OR <input type="checkbox"/> PERMANENT <input type="checkbox"/> GRANTED OR <input type="checkbox"/> DENIED	

BRIEF DESCRIPTION OF NATURE OF ACTION AND RESULT BELOW:

*Enforce, Deserve to Spoliate Video, Registry, Default, Atypical Hardship, Witness, punishment to disciplinary hearing*

ISSUES PROPOSED TO BE RAISED ON APPEAL

CERTIFICATE OF SERVICE

I, Joseph Miron, hereby certify that I am the petitioner in this matter and I am representing myself in propria persona.

On this 19 day of June, 2018, I served copies of the Notice of Appeal

in case number: 3:15-cv-00499-MMD-WGC and placed said motion(s) in U.S. First Class Mail, postage pre-paid:

Address: 1) Clerk U.S. Court House

Sent to: District of Nevada  
400 S. Virginia Street Room 301  
Reno, NV. 89501

2) Office of Attorney Gen. Nev.  
MS. Albright  
100 N. Carson Street  
Carson City, NV. ~~89701~~

3) Plaintiff

Joseph Miron #68549  
H.O.S.P. PO Box 650

89701

DECLARATION UNDER PENALTY OF PERJURY

The undersigned declares under penalty of perjury that he is the petitioner in the above-entitled action, and he, the defendant has read the above CERTIFICATE OF SERVICE and that the information contained therein is true and correct. 28 U.S.C. §1746, 18 U.S.C. §1621.

Executed at High Desert State Prison  
on this 19 day of June, 2018.

Joseph Miron 68549  
DOP#

PETITIONER -- In Proper Person

AO 435 • (Rev. 10/05)		Administrative Office of the United States Courts		<b>FOR COURT USE ONLY</b> <b>DUE DATE:</b>	
Read Instructions on Back:				<b>TRANSCRIPT ORDER</b>	
1. NAME <i>Joseph Mazon</i>		2. PHONE NUMBER <i>0</i>		3. DATE <i>6-19-18</i>	
4. FIRM NAME <i>0</i>					
5. MAILING ADDRESS <i>High Desert State Prison P.O. Box 650</i>		6. CITY <i>Indian Springs</i>		7. STATE <i>NV</i>	8. ZIP CODE <i>89020</i>
9. CASE NUMBER <i>3:15-cv-00499-MMD vgc</i>		10. JUDGE <i>Miranda M. Div.</i>		11. DATES OF PROCEEDINGS <i>6-15-18</i>	
13. CASE NAME		14. LOCATION OF PROCEEDINGS <i>US Dist Court</i>		15. STATE <i>NV</i>	
16. ORDER FOR <input checked="" type="checkbox"/> APPEAL <input type="checkbox"/> CRIMINAL <input type="checkbox"/> CRIMINAL JUSTICE ACT <input type="checkbox"/> BANKRUPTCY <input type="checkbox"/> NON-APPEAL <input type="checkbox"/> CIVIL <input type="checkbox"/> IN FORMA PAUPERIS <input type="checkbox"/> OTHER (Specify)					
17. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)					
PORTIONS		DATE(S)		PORTION(S)	
<input type="checkbox"/> VOIR DIRE				<input type="checkbox"/> TESTIMONY (Specify)	
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)					
<input type="checkbox"/> OPENING STATEMENT (Defendant)					
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)				<input type="checkbox"/> PRE-TRIAL PROCEEDING	
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)					
<input type="checkbox"/> OPINION OF COURT					
<input type="checkbox"/> JURY INSTRUCTIONS				<input checked="" type="checkbox"/> OTHER (Specify)	
<input type="checkbox"/> SENTENCING				<i>2015 to June 15, 2018</i>	
<input type="checkbox"/> BAIL HEARING				<i>All Papers, Exhibits, Proceedings, Orders, Motions</i>	
18. ORDER					
CATEGORY	ORIGINAL + 1 (original to Court, copy to ordering party)	FIRST COPY	# OF ADDITIONAL COPIES	DELIVERY INSTRUCTIONS (check all that apply)	ESTIMATED COSTS
30 DAYS	<input type="checkbox"/>	<input type="checkbox"/>		PAPER COPY <input type="checkbox"/>	
14 DAYS	<input type="checkbox"/>	<input type="checkbox"/>		E-MAIL <input type="checkbox"/>	
7 DAYS	<input type="checkbox"/>	<input type="checkbox"/>		DISK <input type="checkbox"/>	
DAILY	<input type="checkbox"/>	<input type="checkbox"/>		PDF FORMAT <input type="checkbox"/>	
HOURLY	<input type="checkbox"/>	<input type="checkbox"/>		ASCII FORMAT <input type="checkbox"/>	
REALTIME	<input type="checkbox"/>	<input type="checkbox"/>			
CERTIFICATION (19. & 20.) By signing below, I certify that I will pay all charges (deposit plus additional).				E-MAIL ADDRESS	
19. SIGNATURE <i>Joseph Mazon</i>				NOTE: IF ORDERING BOTH PAPER AND ELECTRONIC COPIES, THERE WILL BE AN ADDITIONAL CHARGE.	
20. DATE <i>6-19-18</i>					
TRANSCRIPT TO BE PREPARED BY				ESTIMATE TOTAL	0.00
ORDER RECEIVED	DATE	BY	PROCESSED BY	PHONE NUMBER	
DEPOSIT PAID			DEPOSIT PAID		
TRANSCRIPT ORDERED			TOTAL CHARGES	0.00	
TRANSCRIPT RECEIVED			LESS DEPOSIT	0.00	
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT			TOTAL REFUNDED		
PARTY RECEIVED TRANSCRIPT			TOTAL DUE	0.00	

DISTRIBUTION:

COURT COPY

TRANSCRIPTION COPY

ORDER RECEIPT

ORDER COPY